

Host:
Server Side
Component

Gateway

Remote:
Field Application
Component

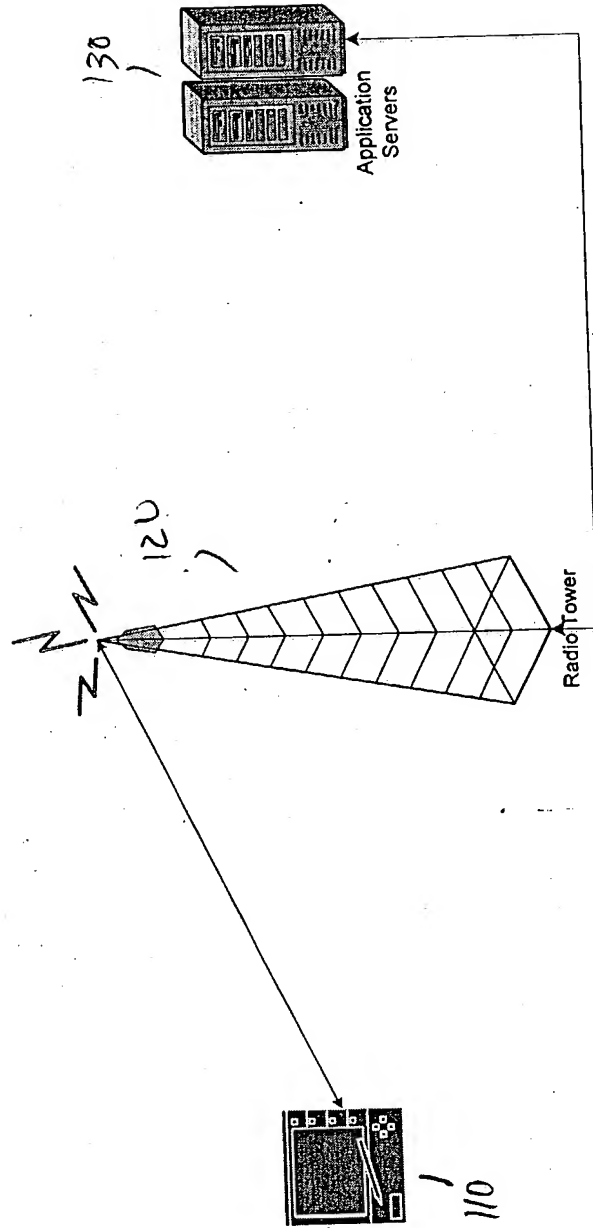
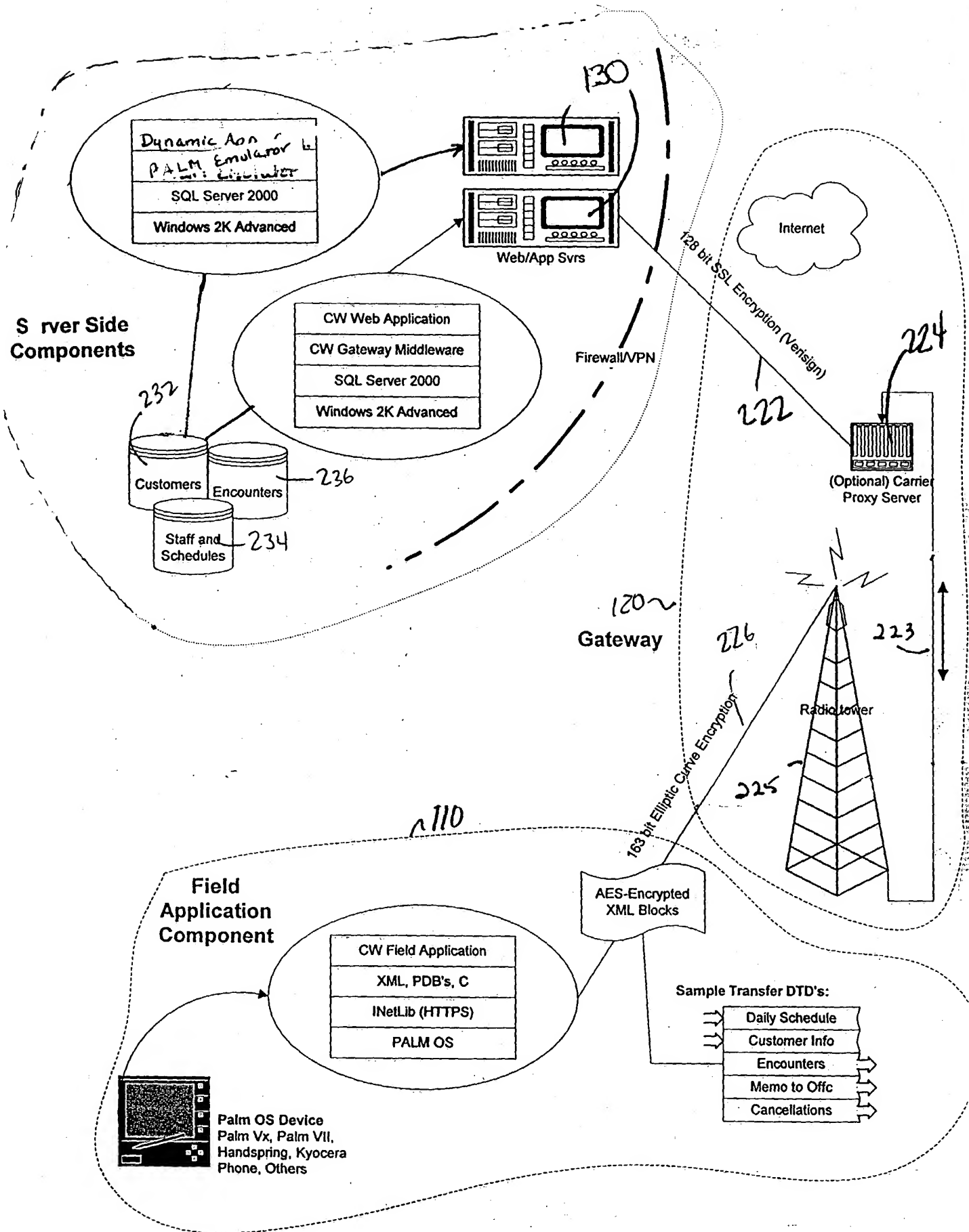


FIG. 1



F16. 2A

Better Healthcare Company

HL5 POWERED BY CREDIBLE WIRELESS

Consumer Case Mgr Plan Service Admin Billing Reports Logout

```
<?xml version="1.0" ?>
- <Export>
  - <ExportLine>
    <residence_type>Private home</residence_type>
    <sex>Male</sex>
    <last_name>DOE</last_name>
    <first_name>GEPETTO</first_name>
    <dob>07111969</dob>
    <Low_Self-Esteem />
    <Hopelessness />
    <Worthlessness />
    <Pending_Doom />
    <duration>1/1/1900 12:14:00 AM</duration>
  </ExportLine>
  - <ExportLine>
    <residence_type>Private home</residence_type>
    <sex>Male</sex>
    <last_name>DOE</last_name>
    <first_name>GEPETTO</first_name>
    <dob>07111969</dob>
    <Low_Self-Esteem>Y</Low_Self-Esteem>
    <Hopelessness />
    <Worthlessness />
    <Pending_Doom />
    <duration>1/1/1900 12:01:00 AM</duration>
  </ExportLine>
```

FIG. 2B

Export Tools

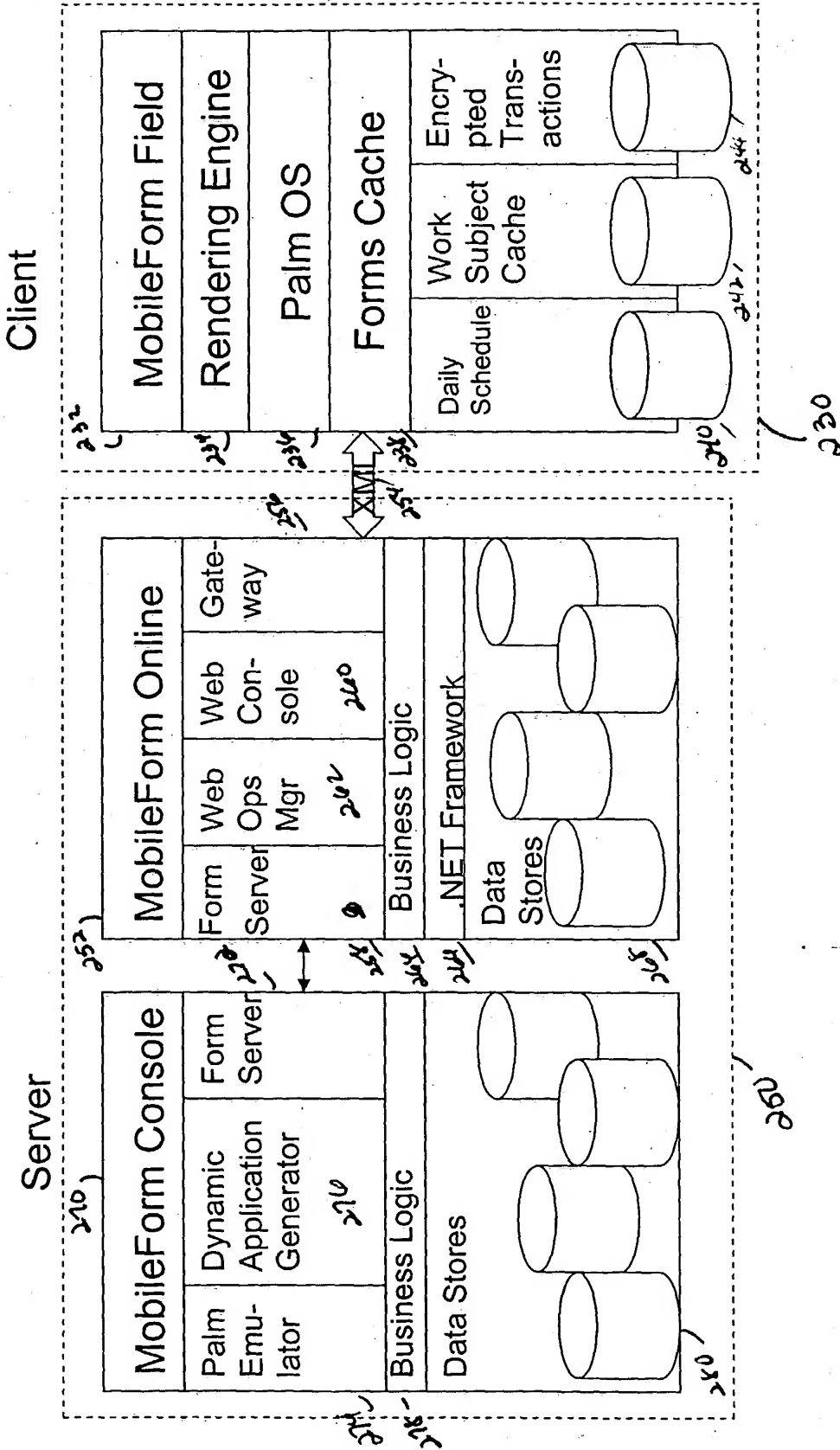


FIG. 2C

305 L

eHomeCare - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites History Mail Print Edit Discuss Del Home

Links Address https://www.ehomecare.ws Search Messenger Y! Bookmarks My Yahoo! Y! Mail News Entertainment Sports Shopping

302 304 306 308

eCredibleHomeCare™
by eCredibleSolutions, Inc.

LOGIN CLIENTS PERSONNEL PLANNER ADMIN

Client List: A B C E F G H I J K L M N O P R S T U V W X Y Z ALL ACTIVE FILTER

Showing 1 to 17 of 22.

#	Last Name	First Name	Area	City	State	Birthdate	Phone(l)	Status	ID	
1								ACTIVE	1708	View
2								ACTIVE	1679	View
3								ACTIVE	1568	View
4								ACTIVE	1557	View
5								ACTIVE	1540	View
6								ACTIVE	1743	View
7								ACTIVE	1754	View
8								ACTIVE	1755	View
9								ACTIVE	1599	View
10								ACTIVE	1476	View
11								ACTIVE	1850	View
12								ACTIVE	1311	View
13								ACTIVE	1735	View
14								ACTIVE	1865	View
15	DOE	ANN	AA	BOWE	MD	3/12/1971	(301) 555-2323	ACTIVE	1833	View
16	DOE	JOHN	AA	BOWE	MD	3/31/1960	(301) 555-1212	ACTIVE	1832	View
17	Doe	Lisa	AA	Elsewhere	MD	6/2/1951	410-333-545	ACTIVE	1835	View

330 View

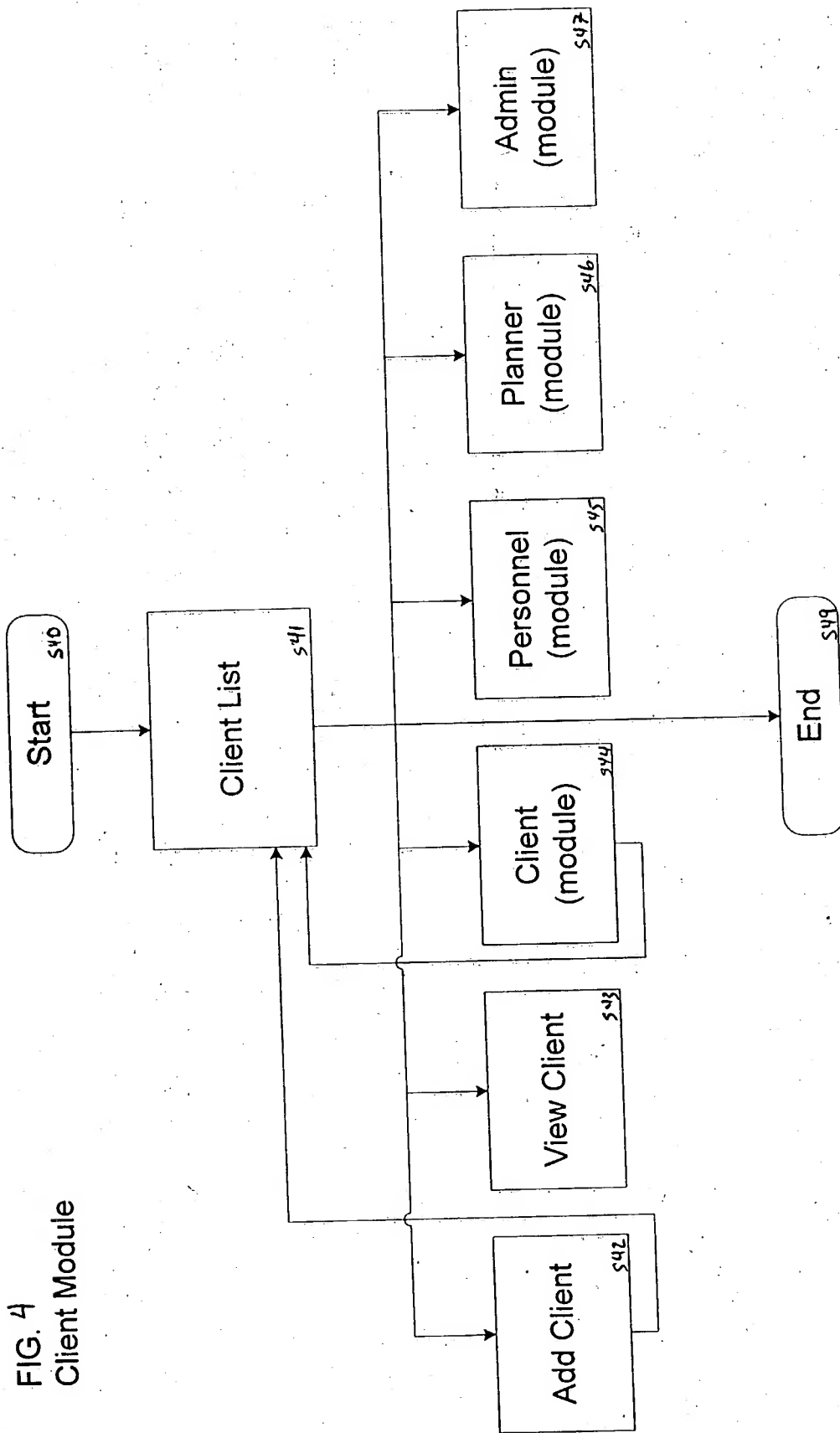
320

316 1 2 314

312 ADD CLIENT

F16.3

FIG. 4
Client Module



Internet Explorer - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Back Forward Home Search Favorites History Mail Print Disconnect Dial Home

Address http://www.eCreditableHomeCare.com/ Search Message My Bookmarks My Yahoo! My Mail News Downloads Speller Shopping

eCreditableHomeCare

LOGIN CLIENTS PROGRAMS PLANNING ADMIN

Client Add/Update

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
DOB:	<input type="text"/>	DOB:	<input type="text"/>
SSN:	<input type="text"/>	Auto 1 Code:	Chrome
Address:	<input type="text"/>	Address2:	<input type="text"/>
City:	<input type="text"/>	State:	<input type="text"/>
Zip:	<input type="text"/>	Client Status:	ACTIVE
Home Phone:	<input type="text"/>	Geographic Area:	AA
Emergency Contact:	<input type="text"/>	Emergency Phone:	<input type="text"/>
Marital Status:	DIVORCED	Spouse Name:	<input type="text"/>
Referred By:	<input type="text"/>	Source/Ref Source:	<input type="text"/>
Auth By:	<input type="text"/>	Auth Status:	Start End
Auth Date:	<input type="text"/>	Auth Status Date:	<input type="text"/>
Copy Fee:	<input type="text"/>	Copy Fee:	<input type="text"/>
Ref Fee:	<input type="text"/>	First Service Date:	<input type="text"/>
Referral:	<input type="text"/>	Appointment Date:	<input type="text"/>

Add Client Cancel ~ 506

F16. 5

600

Internet Explorer

Address: https://www.eCredibleHomeCare.com

Search

352 354 356 358 eCredibleHomeCare.com

LOGIN | CURRENTS | PERSONNEL | PLANNER | ADMIN

Client View

Name:	DOE, JOHN	Client Status:	ACTIVE
SSN:	111-22-3333	DOB:	30/11/1950
MAR ID:	073078277	Auth 1 Code:	206 31 - MAJOR DEPRESSION, RECURRENT, MILD
Address:	12013 HAPPY LANE	Address2:	
City, State:	BONE, MD	Zip:	20715
Home Phone:	(301) 555-1212	Geographic Area:	KA
Emergency Contact:	MARY (SISTER)	Emergency Phone:	(301) 555-1212
Marital Status:	DIVORCED	Spouse Name:	None
Referred By:	Psychiatrist	Auth No.:	H2703455201
Auth Start Date:	1/1/2001	Auth End Date:	7/1/2001
Auth Rate:	130	Auth Write Month:	
Copay Fee:		Copay Pct:	
Flat Fee:		First Service Date:	1/1/2001
Referral Date:	11/16/2000	Assessment Date:	11/16/2000
Assigned Employee:	GNA BRADLEY, LISA CHAMBERS, Frank Radice		

CPDA:1 251116

Done

Internet

Assign Employees

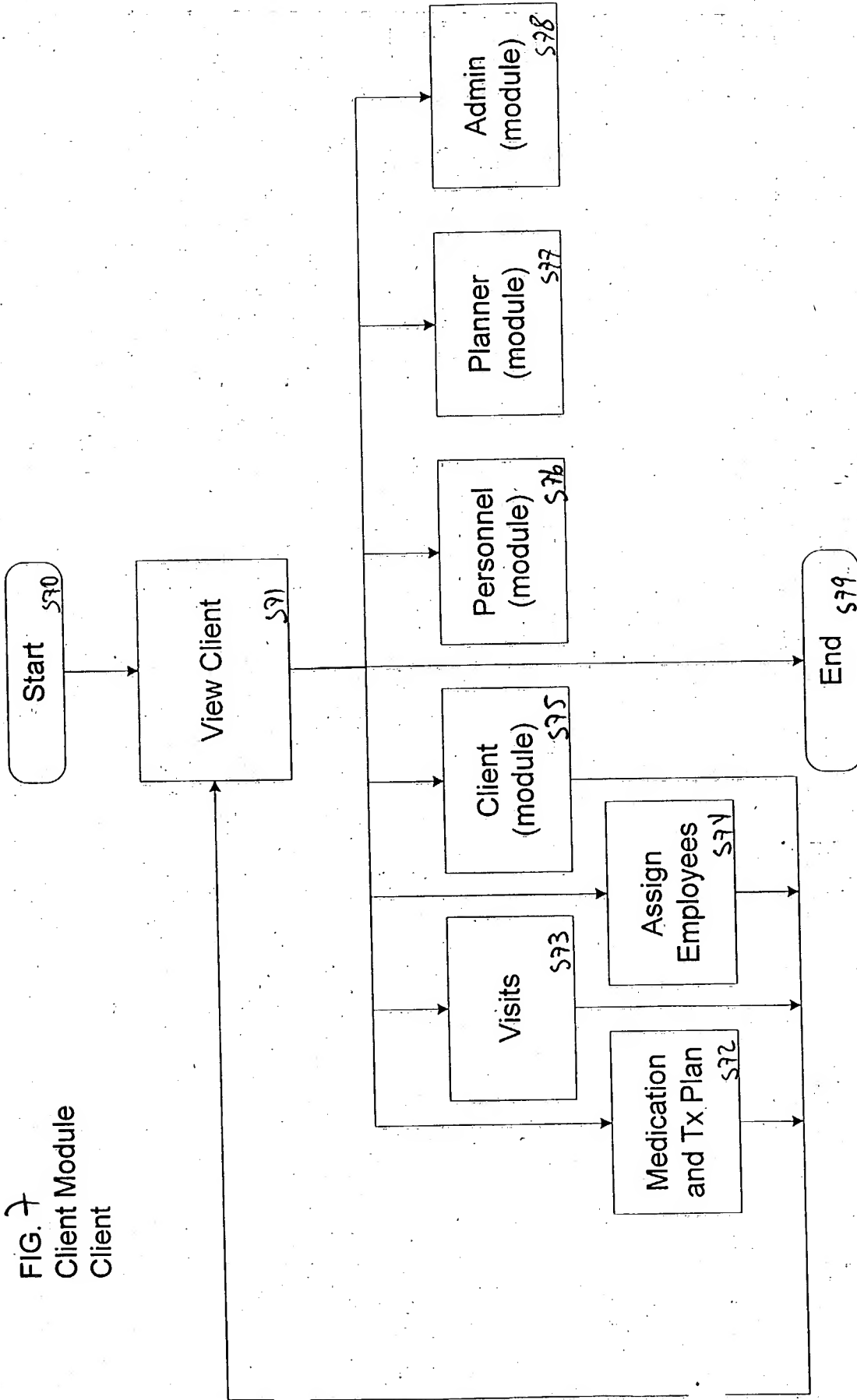
Medication & Treatment Plan

Visits

602

F16. 6.

FIG. 7
Client Module
Client



Medications & Treatment Plan for JOHN DOE

Medication	Dosage	Frequency	Provider	Date	
Cogentin	1mg	BD	Vincent Chaney, M.D.	Started 1/16/2000	Edit
Lithium Carbonate	200mg	BD	Vincent Chaney, M.D.	Started 1/16/2000	Edit
Medication	Dosage	Frequency	Provider	Start Date	Act
			Vincent Chaney, M.D., Psychiatrist		

TREATMENT PLAN

Save Chgs New

Start Date
1/17/2000

Goals

- John will be able to budget his money and save \$100 by 5/17/2001.
- John will follow the recommendations of his Psychiatrist and attend all Psychiatric appointments without prompting by 5/17/2001.
- John will be able to determine when he is feeling anxious and identify and use the techniques that help him stabilize by 5/17/2001.

F16. 8

Client Visit List:
Showing 1 to 2 of 2.

Approved:

Start Date:

End Date:

ID	Approve	Client Name	Emp Name	Status	Date	Time In	Time Out	Plan Date	
<u>6113</u>	<input checked="" type="checkbox"/>	<u>JOHN DOE</u>	<u>Upputuri</u>	COMPLETED	1/30/2001	12:56:00 PM	1:06:00 PM	1/30/2001	View Tree Print
<u>4240</u>	<input type="checkbox"/>	<u>JOHN DOE</u>	<u>Upputuri</u>	COMPLETED	1/24/2001	3:00:00 PM	3:05:00 PM	No Plan	View Tree Print

F16. 9.

Employee Assignment

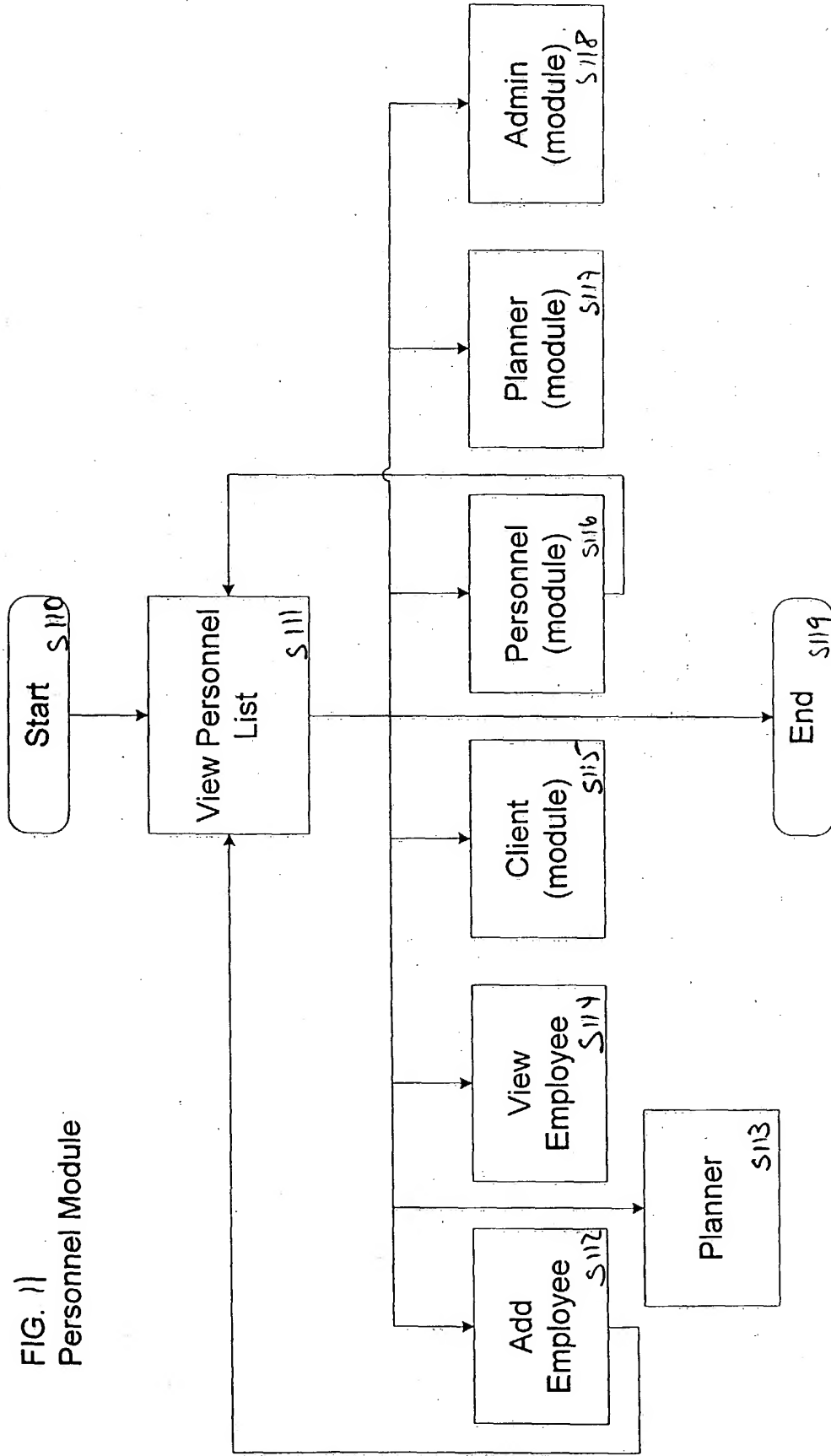
Client Name:	DOE, JOHN	SSH:	111-23-2323
--------------	-----------	------	-------------

Choose Employee ABCDEFGHIJKLMNOPRSTUVWXYZ ALL Show Assigned Only

#	Last Name	First Name	City	SSH	
1					<u>Assign</u>
2					<u>Assign</u>
3					<u>Assign</u>
4					<u>Assign</u>
5					<u>Assign</u>
6					<u>Assign</u>
7					<u>Assign</u>
8					<u>Assign</u>
9	Upuluri	Stanley	BALTIMORE	209-24-2278	<u>* Remove (unassign)</u>
10					<u>Assign</u>
11					<u>Assign</u>
12					<u>Assign</u>
13					<u>Assign</u>

Fig 10

FIG. 1)
Personnel Module





eCreditableHomeCare™

by eCredibleSolutions, Inc.

LOGIN | CUSTOMS | PERSONNEL | PLANNER | ADMIN |

Employee List A B C D E F G H I J K L M N O P R S T V W Y Z ALL
Showing 1 to 1 of 1.

ACTIVE ☒ FILTER

#	Last Name	First Name	City	State	Phone(1)	Phone(2)	ID	SSN
1	<u>Upduri</u>	Stanley	BALTIMORE	MD	410-555-1212	410-555-1222	48	209-24-2278

View Planner

ADD EMPLOYEE

-1212

F16-12

Employee Add/Update:

First Name:	<input type="text"/>	Last Name:	<input type="text"/>
Middle Name:	<input type="text"/>	Nick Name:	<input type="text"/>
Title:	<input type="text"/>	Region:	<input type="text"/>
SSN:	<input type="text"/>	Date of Birth:	<input type="text"/>
Supervisor:	<input type="text"/>	External ID:	<input type="text"/>
Address1:	<input type="text"/>	Address2:	<input type="text"/>
City:	<input type="text"/>	State:	<input type="text"/>
Zip:	<input type="text"/>	Pager Number:	<input type="text"/>
Home Phone:	<input type="text"/>	Mobile Phone:	<input type="text"/>
Work Phone:	<input type="text"/>	Fax Number:	<input type="text"/>
Emergency Contact:	<input type="text"/>	Emergency Phone:	<input type="text"/>
Hire Date:	<input type="text"/>	Term Date:	<input type="text"/>
Status:	<input type="text" value="INACTIVE"/>		
	<input type="button" value="Add Employee"/>	<input type="button" value="Cancel"/>	









1312

1314

F16, 13

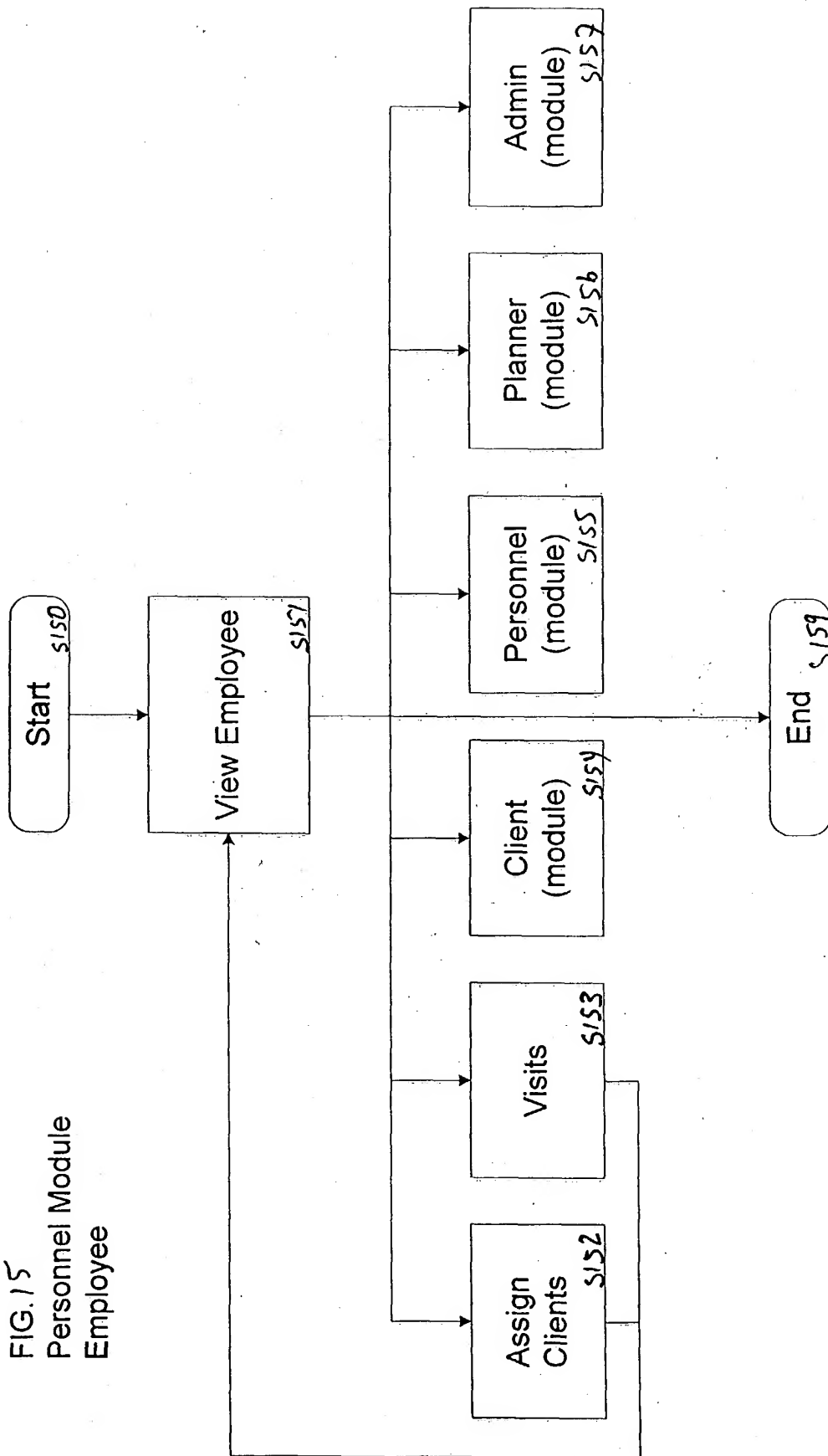
1402

(← prev) Weekly Planner for Vyne Uppuluri - 2/4/2001 (next →)

SUN 2/4/2001	MON 2/5/2001	TUE 2/6/2001	WED 2/7/2001	THU 2/8/2001	FRI 2/9/2001	SAT 2/10/2001
		<u>Doe, J</u> (SCHEDULED)  0830	<u>Doe, J</u> (SCHEDULED)  0830	<u>Doe, J</u> (SCHEDULED)  0830	<u>Doe, J</u> (SCHEDULED)  1700	
		<u>Doe, H</u> (SCHEDULED)  0830	<u>Doe, H</u> (SCHEDULED)  0830	<u>Doe, H</u> (SCHEDULED)  0830	<u>Doe, H</u> (SCHEDULED)  1830	

F16. 14

FIG. 15
Personnel Module
Employee



1604

Employee View

Visits | Assign Clients

1606

Name:	Upukuri, Stanley	Nick Name:	Stan
SSN:	209-24-2278	DOB:	10/07/1957
Supervisor:	TAMMY PHILIPPE	External ID:	048
Title:	MENTAL HEALTH ADE	Region:	BALTIMORE
Address1:	1336 Underwood Dr.	Address2:	
City, State:	BALTIMORE, MD	Zip:	21239
Home Phone:	410-555-1212	Mobile Phone:	410-555-1222
Work Phone:		Fax Number:	
Pager Number:		Status:	ACTIVE
Emergency Contact:	Meinda Upukuri	Emergency Phone:	410-555-1212
Hire Date:	1/6/2000	Term Date:	
Notes:			
Assigned Clients:	JOHN DOE		

UPDATE DELETE EDIT LOGIN

1602

1608

K16. 16

1704 1706
• Client successfully assigned to Employee [Click here to return to Employee Record](#)

Client Assignment

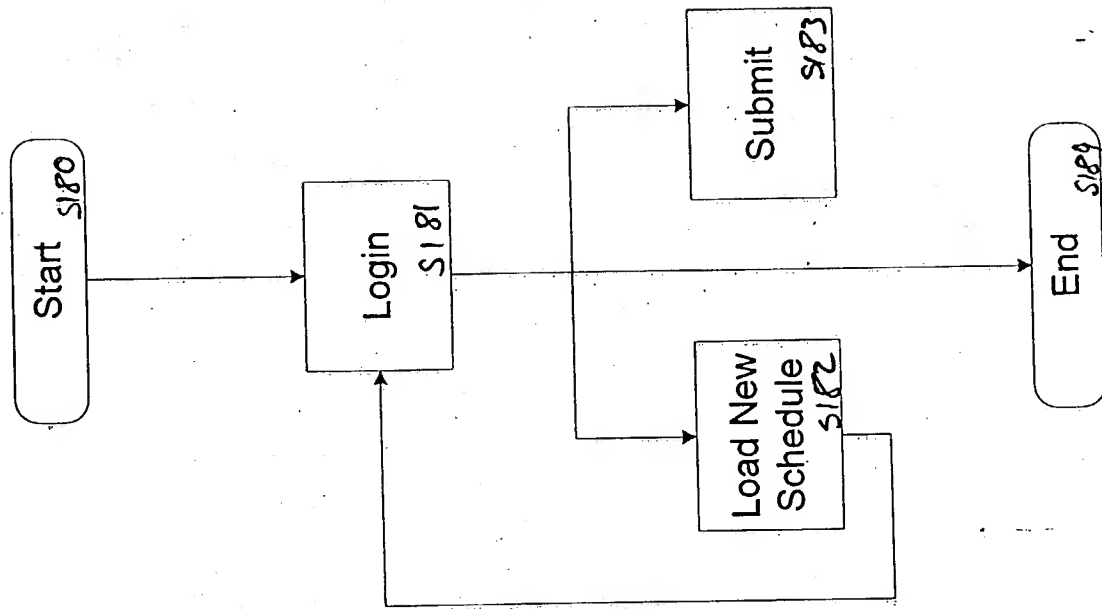
Employee Name: Upokari, Stan SSN: 209-24-2278

Choose Client A B C D E F G H I J K L M N O P R S T U V W X Y Z ALL [Show Assigned Only](#)

#	Last Name	First Name	City	SSN	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12	DOE	JOHN	BOWE	111-23-2323	* Remove (unassign)
13					
14					

1702
F16. 17.

FIG. 18
Remote - Login



Company Name Here

Welcome to ScheduleHop.com™

Login: Username: _____

Password: enter: _____

☐ Load New Schedule

FIG. 19

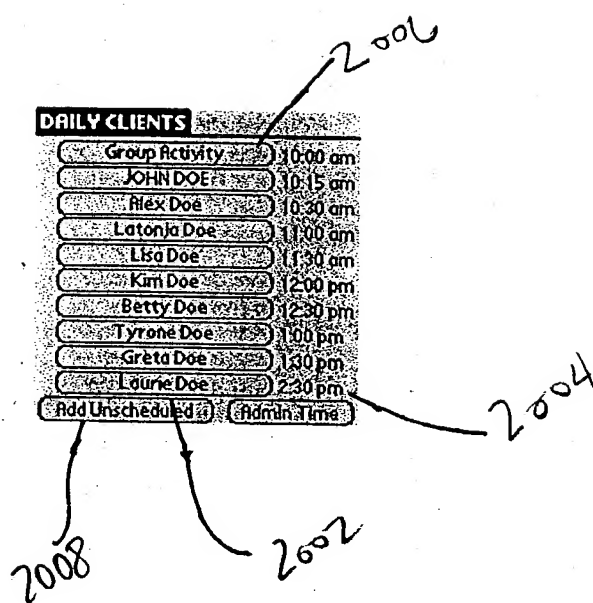


FIG. 20

FIG. 21
Daily Clients

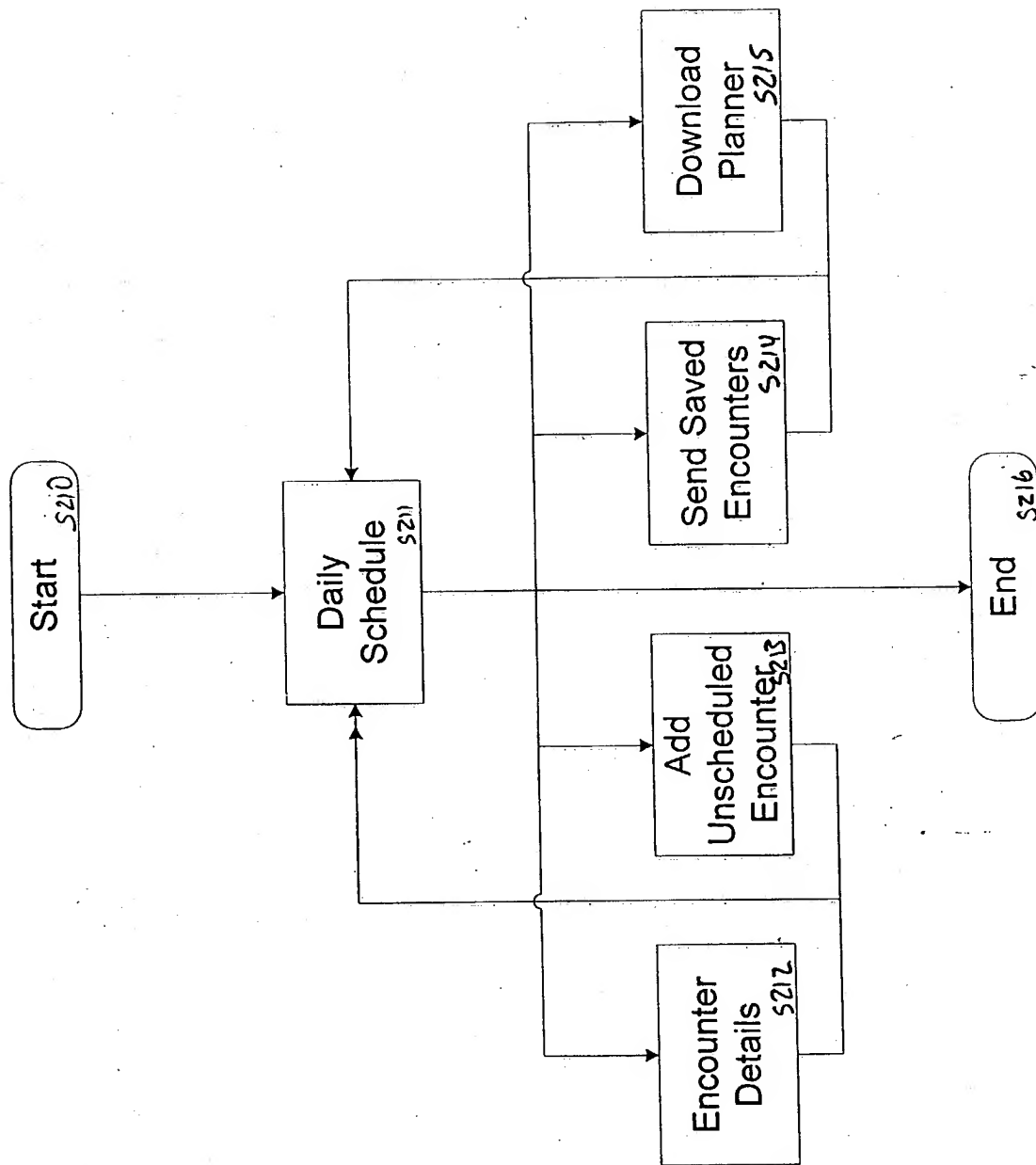
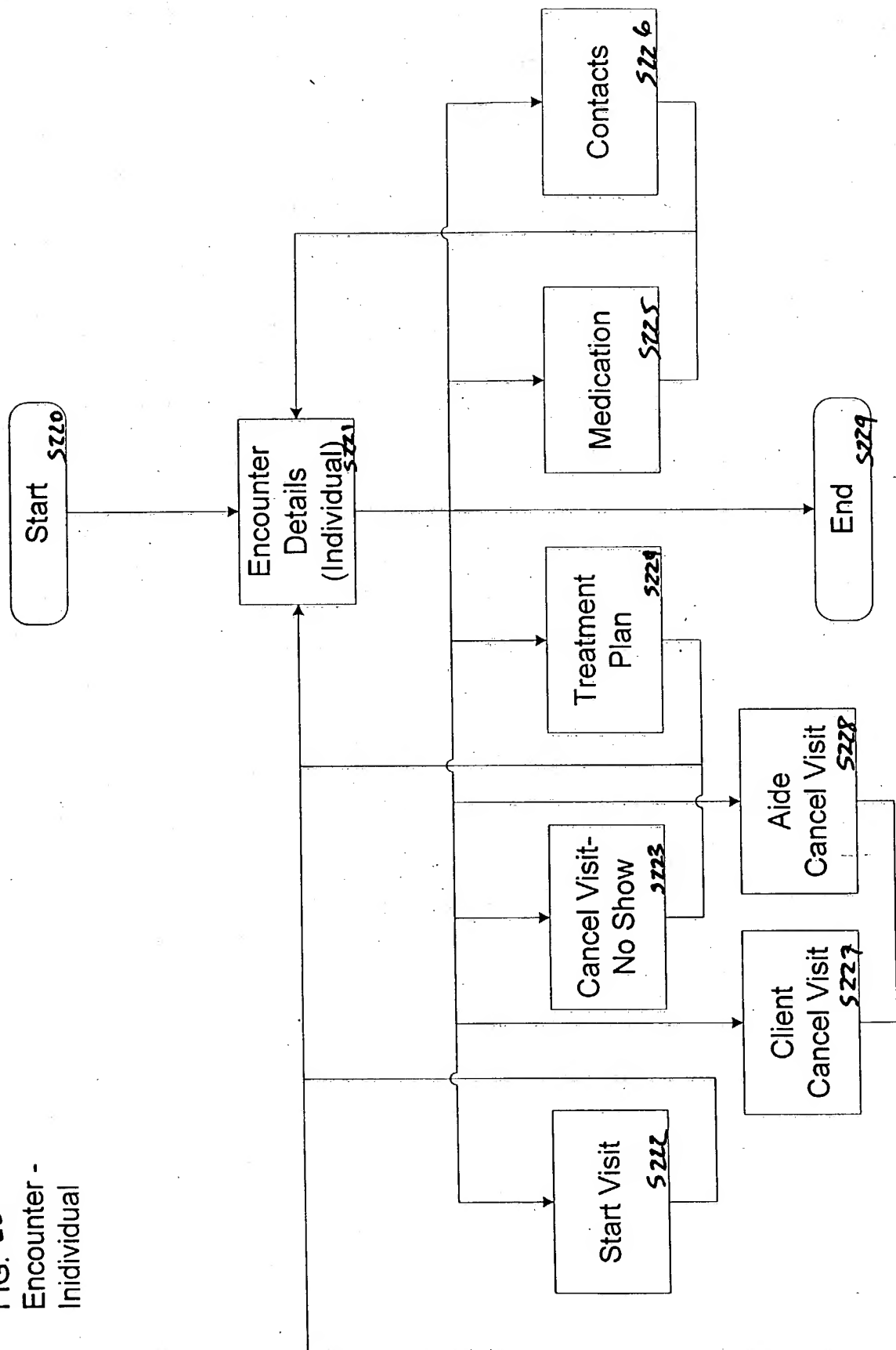


FIG. 22
Encounter -
Individual



ADD UNSCHEDULED CLIENT

Enter Client Information

* All Fields Required

First Name: _____

Last Name: _____

MR #: _____

~2302

-2304

2308 2306

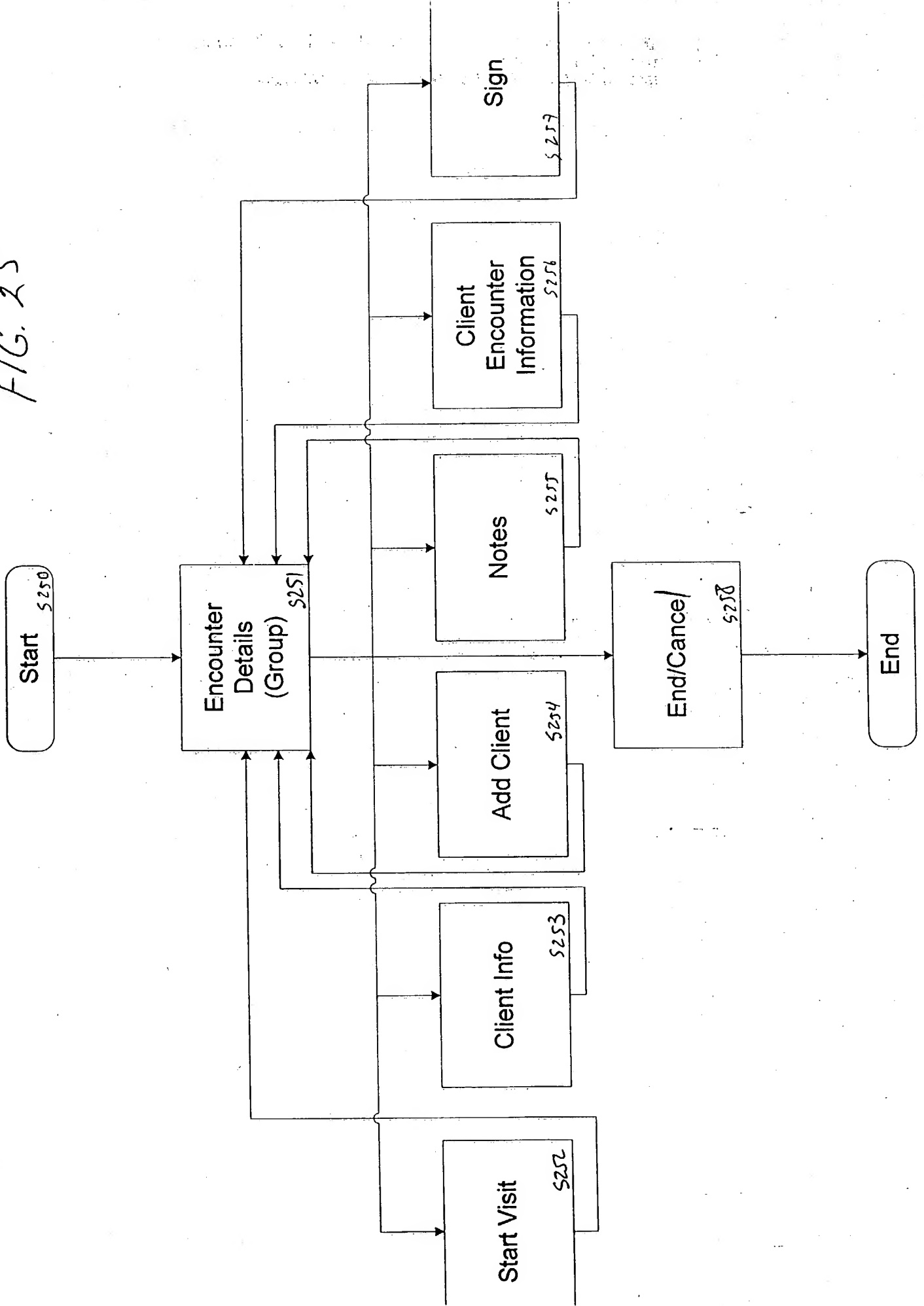
F16. 23

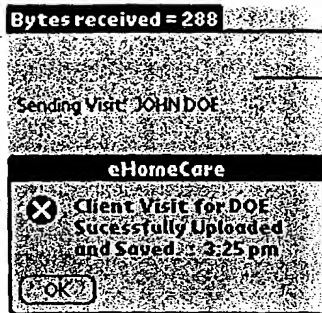
2404

DAILY CLIENTS	
Group Activity	10:00 am
JOHN DOE	11:15 am
ALEX DOE	12:00 pm
GRETA DOE	3:00 pm
Add Unscheduled	
Admin Time	

F16 24

FIG. 25





F16 26

DAILY CLIENTS

Group Activity	10:00 am
✓ JOHN DOE	11:15 am
ALEX DOE	12:00 pm
GRETA DOE	3:00 pm

Add Unscheduled Admin Time

Flb 27

2802
2804
2806
2808
2810
2812
2814
2816

CLIENT DETAILS

JOHN DOE 11:15 am
12013 HAPPY LANE
BOYIE, MD 20000
410-555-5565 Ins: 012345678901
Work on Budget Goal

Start Visit

Hide Cancel

Client Cancel

No Show

Email Office

Tx Plan

Meds

Contacts

Go Back

CLIENT VISIT

Main Categories

- Daily Living Skills
- Community Living Skills
- Money Planning
- Medication Monitoring
- Crisis Intervention
- Symptom & Stress Mgmt
- Cancel
- End Interview

2904

2906

2902

F/6 29.

Signature Capture

	Emp
	Client
<input type="button" value="Clear"/> <input type="button" value="Save"/>	

2002

2004

L
2006

F16 30

TREATMENT PLAN GOALS

1. John will be able to budget his money and save \$100 by 1/17/2002.
2. John will follow the recommendations of his Psychiatrist and attend all Psychiatric appointments without prompting by 1/17/2002.
3. John will be able to determine

OK

F16_ 31

MEDICATIONS	
Prozac 40mg BID	Vincent Chaney, MD, 7/1/2001
Klonopin 5mg qid tab at bedtime	Vincent Chaney, MD, 7/1/2001
Cogentin 1mg BID	Vincent Chaney, MD, 11/16/2000
Lithium Carbonate 200mg BID	Vincent Chaney, MD, 11/16/2000

OK

F16 . 32

Group Activity

Socialization Group

JOHN DOE	S	(N)	(X)
Janet Doe	S	(N)	(X)
Bernita Doe	S	(N)	(X)
Alex Doe	S	(N)	(X)
Latonya Doe	S	(N)	(X)
Greta Doe	S	(N)	(X)
Betty Doe	S	(N)	(X)

Add Client

Start Time

Cancel Notes Sign Begin

3404

3406

3408

3408

3410

3402

3412

3414

3416

F/6, 34

NOTES

Notes:

Cancel Completed

3602

3404

F16.35

	ADMIN	EMPLOYEE	MASTER	READONLY	SUPERVISOR	TEAMLEAD
AdminLookupUpdate						
AdminTimeAdd						
AdminTimeApprove						
AdminTimeDelete						
AdminTimeList						
AdminTimeListAll						
AdminTimeUpdate						
AdminView						
AssignClients						
AssignEmployees						
AuthorizationAdd						
AuthorizationDelete						
AuthorizationView						
AvgVisits						
Billing_ctab						
BillingCPTCodes						
ClientAdd						
ClientDelete						
ClientList						
ClientListAll						
ClientUpdate						
ClientView						
ClientViewAll						
ClientVisitApprove						
ClientVisitDelete						
ClientVisitList						
ClientVisitListAll						
ClientVisitUpdate						
ClientVisitView						
ClientVisitViewAll						
Duration						
EmployeeAdd						
EmployeeDelete						
EmployeeList						
EmployeeListAll						
EmployeeUpdate						
EmployeeView						
EmployeeViewAll						
MedTrend						
Payrollv3						
PlannerAdd						
PlannerUpdate						
PlannerView						
PlannerViewAll						
ProviderList						
ReportList						
ReportPayrollView						
ReportView						
RescheduleAssign						
RescheduleCancel						
RescheduleList						
RptAuth						
RptBalanceDtl						

FIG. 36 a

RptContactSheet						
RptPrintouts						
Schedule_ctab						
SecurityUpdate						
TimeChangeList						
Tracker						
TransferLogList						
TransferLogView						
TxRxUpdate						
TxRxView						
UserAdd						
UserList						
UserUpdate						

FIG. 36b

Authorization Management



CREDIBLE
WIRELESS

eCredibleHomeCare™

FEEDBACK

BILLING

ADMIN

PLANNER

PERSONNEL

CLIENTS

Authorizations for ALL CLIENTS

Showing 1 to 20 of 176. - Last Calculated On 5/2/2002 7:30:02 PM

Period Start	Period End	Auth Number	Auth Date	Entered By	Units	Pacing (U/T)
1/17/2002	4/7/2002	H189475S306	1/18/2002		20 / 26	77%, 100%
3/18/2002	4/9/2002	H222735S402	4/25/2002		21 / 24	88%, 67%
1/23/2002	4/23/2002	H25444541S204	1/29/2002		1 / 65	2%, 100%
11/12/2001	5/2/2002	H005088SC04	12/5/2001		66 / 78	85%, 99.9%
11/12/2001	5/2/2002	H244125S303	12/7/2001		83 / 208	40%, 99.9%
5/2/2002	5/2/2002	H256506S401	5/2/2002		0 / 104	0%, 0%
11/13/2001	5/3/2002	H199091S306	11/27/2001		122 / 130	94%, 99.3%
1/3/2002	5/3/2002	H240290S304	1/21/2002		55 / 52	106%, 99%
11/14/2001	5/4/2002	H162018S803	11/20/2001		67 / 130	52%, 98.8%
11/14/2001	5/4/2002	H015756S706	1/14/2002		84 / 78	108%, 98.8%
1/4/2002	5/4/2002	H245466S407	2/11/2002		32 / 48	67%, 98.2%
2/3/2002	5/5/2002	H211936S207	1/29/2002		45 / 65	69%, 96.5%
2/3/2002	5/5/2002	H216877S405	2/5/2002		26 / 39	67%, 96.5%
11/16/2001	5/6/2002	H296095S202	12/12/2001		61 / 156	39%, 97.7%
1/7/2002	5/7/2002	H244145S208	1/10/2002		4 / 69	6%, 95.7%
2/8/2002	5/8/2002	H272558S504	2/12/2002		7 / 65	11%, 93.1%
2/8/2002	5/8/2002	H006136SD04	2/11/2002		46 / 65	71%, 93.1%
2/8/2002	5/8/2002	H178075S505	2/12/2002		52 / 65	80%, 93.1%
2/8/2002	5/8/2002	H188961S301	2/11/2002		48 / 65	74%, 93.1%
11/10/2001	5/10/2002	H074516S307	12/28/2001		90 / 208	43%, 95.5%

1 2 3 4 5 6 7 8 9

- Key
- Within anticipated pace (+/- 15%)
 - Exceeding anticipated pace
 - Over authorized amount
 - Under anticipated pace
 - Inactive Period

FIG. 37(a)

Confidential and Proprietary

CREDIBLE
WIRELESS

Visit Duration Report

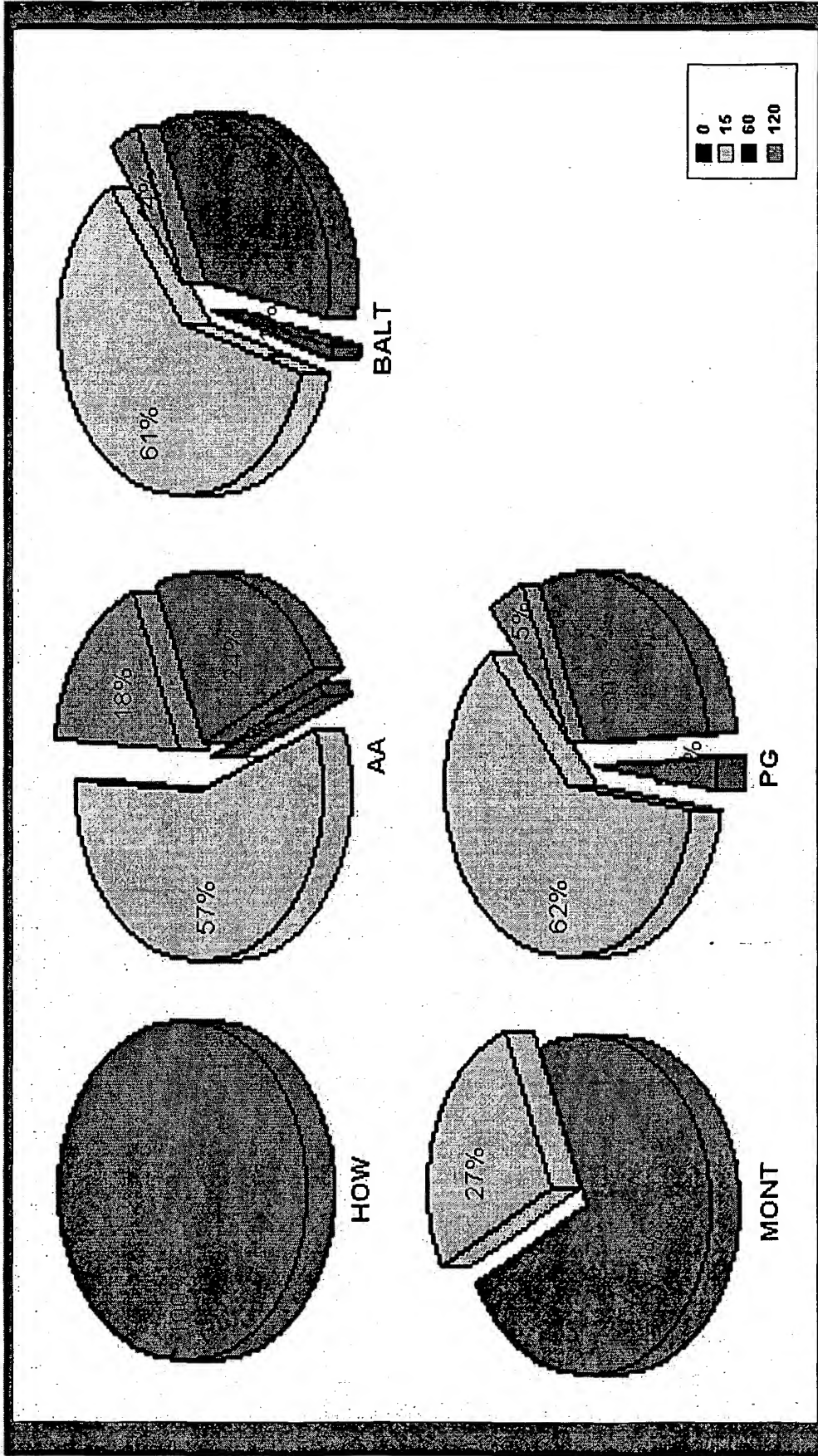


FIG. 37(b)

CREDIBLE
WIRELESS

Confidential and Proprietary

Daily Tracker

513102

Status/Employee

Staff w/ Schedule

Date: 01-May-2002

Cancellations **Last Download**

Admin

Completed

Scheduled

7	7	5/2/02	7:19:13AM	1
0	2	5/3/02	7:59:48AM	1
6	6	5/3/02	7:51:16AM	3
4	3	5/2/02	7:39:03AM	3
4	5	5/3/02	8:43:43AM	3
6	7	5/3/02	7:26:28AM	10
3	3	5/3/02	8:52:05AM	2
5	8	5/1/02	7:15:57AM	5
3	8	5/3/02	7:58:48AM	5
2	3	5/2/02	8:37:00AM	6
6	8	5/3/02	8:01:13AM	1
0	1	5/3/02	10:03:44AM	4
4	6	5/3/02	8:32:22AM	8
6	7	5/3/02	7:59:52AM	6
1	2	5/3/02	8:42:13AM	1
4	5	5/2/02	7:05:43AM	3
0	1	5/2/02	11:57:24AM	8
8	7	4/27/02	12:32:28AM	6
5	9	5/2/02	6:44:39AM	4
4	6	5/3/02	8:44:51AM	3
4	6	5/2/02	9:47:09AM	3
4	5	5/2/02	11:57:24AM	3
0	1	4/27/02	12:32:28AM	8
8	9	5/2/02	6:44:39AM	6
5	9	5/3/02	8:44:51AM	4
4	6	5/2/02	9:47:09AM	3
6	5	5/3/02	6:29:41AM	6
5	10	5/3/02	9:50:02AM	2
7	5	5/3/02	10:22:08AM	3

FIG. 37(c)

CREDIBLE WIRELESS

Confidential and Proprietary

Average Visits Report

8/1/2003

Pe
Pe

Region/Supervisor/Employee
AA

Visit Count

Work Days*

Averages

WEBB, DAVID
Supervisor Total/Avg
AA Total/Avg

BALT CO
CHAMBERS, LISA
RADICS, FRANK
Supervisor Total/Avg
BALT CO Total/Avg
Company Total/Avg

4	2	2.00
4	2	2.00
4	2	2.00
7	4	1.75
7	4	1.75
7	4	1.75
11	6	1.83

Analytic Reporting



CREDIBLE
WIRELESS

LOGIN CLIENTS PERSONNEL PLANNER ADMIN BILLING FEEDBACK eCredibilityHomeCare

Review Selected Visits for Batch

Total Visits (16)

ID	Submit	Return	CPT Code	Rate	Copy	Client Name	Emp Name	Type	Status	Date	Length	View	Visit
175185	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/11/2002	40 min	View	
175407	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/13/2002	42 min	View	
175042	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/18/2002	37 min	View	
178245	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0542	852	90			Visit	COMPLETED	2/25/2002	78 min	View	
175387	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/26/2002	47 min	View	
178740	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/27/2002	41 min	View	
175014	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/11/2002	36 min	View	
175464	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/12/2002	30 min	View	
175740	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/18/2002	21 min	View	
177471	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0542	852	83.72			Visit	COMPLETED	2/21/2002	88 min	View	
178207	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/25/2002	38 min	View	
178521	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/27/2002	38 min	View	
178802	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0542	852	83.72			Visit	COMPLETED	2/28/2002	80 min	View	
178811	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0541	850	80			Visit	COMPLETED	2/28/2002	28 min	View	
177545	<input checked="" type="checkbox"/>	<input type="checkbox"/>	W0542	852	83.72			Visit	COMPLETED	2/21/2002	82 min	View	

16 13 89%

Generate Text File for Batch

Indicates Total Number of Services Ready to be Submitted

FIG. 38



CREDIBLE
WIRELESS

LOGIN CLIENTS PERSONNEL PLANNER ADMIN BILLING FEEDBACK eCredibilityHomeCare

Review Selected Claims

Total Claims (16)

ID	Date Submitted	Int #	Sec #	Sub #	Stat #	Total Charges	MRP Charges	Current Charges	Paid Charges	Balance	Submitter	Status	GCX Edit	Rego File	Submit
71	2/11/02 8:46 PM	184	184	0	0	\$10237	\$10704.84	\$10704.84	\$0	\$10704.84	Wabco	BATCHED	EDIT	PRINT	DELETE
73	2/11/02 8:00 PM	8	8	0	0	\$488	\$488	\$488	\$0	\$488	Wabco	BATCHED	EDIT	PRINT	DELETE
75	4/3/02 1:30 PM	475	475	0	0	\$26833	\$26764.2	\$26764.2	\$0	\$26764.2	CHAMBERS	BATCHED	EDIT	PRINT	DELETE

FIG. 39



CREDIBLE
WIRELESS

LOGIN | CLIENTS | PERSONNEL | PLANNER | ADMIN | BILLING | FEEDBACK | CredibleForms.com

Reconcile Batched Claims
Claim Records: (13)
ID Visit Date

Date Batched: 4/1/2002 6:08:56 PM

Medicaid #: 148 2200 4780 Control #: 1795

Visit Type	Visit Length	CPT Code	Charge	Co-Pay	Paid Amount	Ex Codes	Paid	Reject	Pend	Resub
4002	4010	4014	4018							
671 2/27/2002 7:25:00 PM	41 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
670 3/28/2002 8:15:00 PM	47 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
688 2/25/2002 8:04:00 PM	79 min	W8542	\$82.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
688 2/13/2002 7:42:00 PM	37 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
667 2/12/2002 5:30:00 PM	42 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
656 2/11/2002 9:13:00 PM	40 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicaid #: 673 3085 2000 Control #: 1404										
678 3/22/2002 8:08:00 AM	40 min	W8542	\$62.00	\$3.72	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
677 2/27/2002 7:17:00 AM	23 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
676 3/25/2002 3:10:00 PM	38 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
675 2/21/2002 12:55:00 PM	83 min	W8542	\$82.00	\$3.72	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
674 3/13/2002 4:47:00 PM	21 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
673 2/12/2002 4:10:00 PM	30 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
672 2/11/2002 12:24:00 PM	38 min	W8541	\$50.00	\$0	0		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

To apply to check marks to all Boxes, use any of these 4 links

Totals:

Total Services: 13

\$556 \$22.44 \$0

Total

Check Amount: \$19.68

Balance: \$513.61

Update Claims

FIG 40

MobileForm CONSOLE

MobileForm Console powered by Credible Wireless

Company Name: - 4202 -

Company Banner Label: - 4204 -

Partner Login Domain: - 4206 -

Partner DB String (auto): - 4208 -

Partner URL (auto): - 4210 -

Time Zone: - 4212 -

Billing Checkbox Label: - 4214 -

Recipient Label: - 4216 -

Max Notes Size: - 4218 -

Max Reenter Time: - 4220 -

Office Email Address: - 4222 -

BCC Email Address: - 4224 -

Domain Name: - 4226 -

Fax from: address: - 4228 -

Credible Wireless - Demo

Demo

Initial Catalog=eHomeCareTrial_18;Data Source=63.999.999.99,11276;User Id=XXXXXXXXXX;PASSWORD=999

http://demo.crediblewireless.com

EST

Catharapy

2000

test@crediblewireless.com

cw.com

Label for checkbox on billing screen (Catharapy)

Label for Recipient on billing screen (Recipient)

Maximum length of the client notes optional button fields (default 2000)

Maximum length of time a Palm user can exit the app before having to log back in.

Default email address for the office.

Email addresses to bcc all messages to.

Domain of from address for emails (ie. crediblecare.com)

From: email address for efax sends.

Partner Options

eHomeCare L5 Flag ☒

H m Care L5 Billing ☒

Is this client for an eHomeCare L5 trial?

Does this client use eHomeCare L5 Billing?

FIG. 42

Adjust App Settings

Form - Microsoft Internet Explorer

[http://ehcd11.homedcare.ws:5678/list_cats.asp?tvId=1](#)

[Home](#)
[About Us](#)
[Contact Us](#)
[Privacy Policy](#)
[Terms of Service](#)

The Bug Reaper

[Service Queue](#)
[Customers](#)
[Employees](#)
[Reports](#)
[Build Forms](#)
[Advanced](#)
[Logout](#)

Add new category by entering the category name and where to place it.

Category Name: Sort:

Place Under: -- Top Level Category --

Existing Categories:

Category Name	Description	#Sub Cats	Delete
Inspection	Field Inspection checklist and findings	0	X
Treatments	Treatments applied - locations and chemicals used	6	X
Living Room	Treatments applied to Living Room	1	X
Specific Appliances	Specific Appliances in the Kitchen Test	0	X
Dining Room	Treatments applied to Dining Room	2	X
New Test		0	X
Another Level		1	X
Level 4		2	X
Level 5a		0	X
Level 5b		0	X
Kitchen	Treatments applied to Kitchen	2	X
General Area	General Kitchen Area	0	X
Bathroom 1	Treatments applied to Bathroom 1	0	X
Bathroom 2	Treatments applied to bathroom 2	0	X
Bedrooms	Treatments applied to bedrooms	0	X

FIG. 43

Category Edit - Microsoft Internet Explorer

http://StopBot1.ehomecare.ws:5878/category_edit.asp?edit=true&cat_id=1

The Bug Reaper

Service Queue Customers Employees Reports Build Forms Advanced Logoff

Edit Category: 4402

Category Name: Inspection

Place Under: - Top Level Category - 4406

Description: Field Inspection checklist and findings

Order: 1

Add new question by entering the question text, format and order.

Question: 4410

Existing Questions:

Question	Format	Order	Delete
What color is the sky?	DropDown	1	X(2X(1))
What color is the grass?	Push Button	2	X(2X(1))
What time is it?	Text Box	3	X(2X(1))

4414

4412

4420

4422

4424

4426

Return to Form List **PAI PREVIEW**

F 16 44

FIG. 45(b)

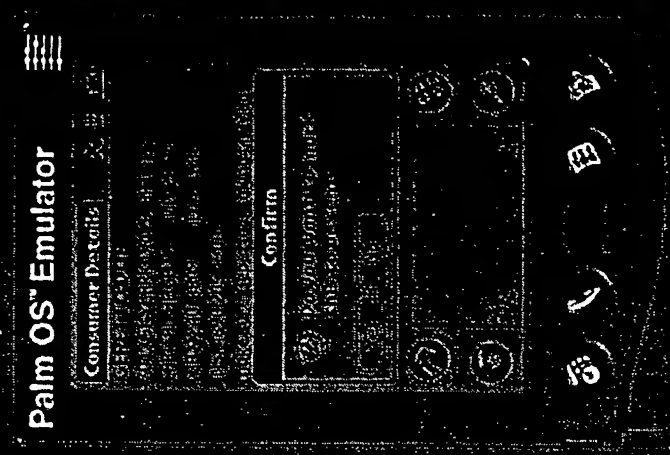
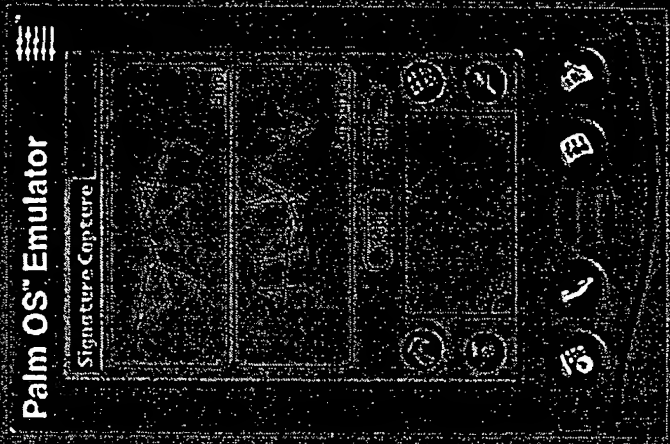
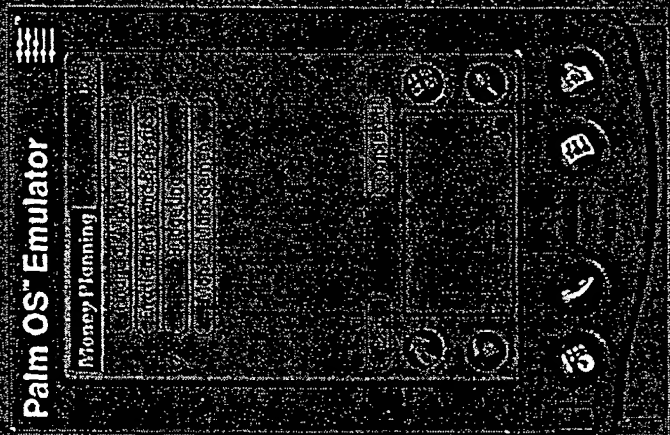
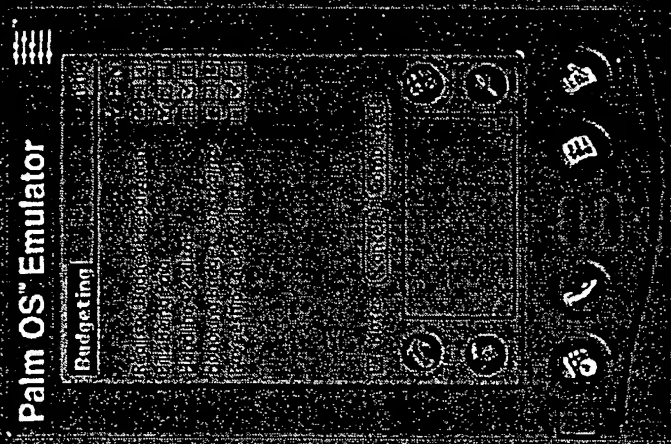
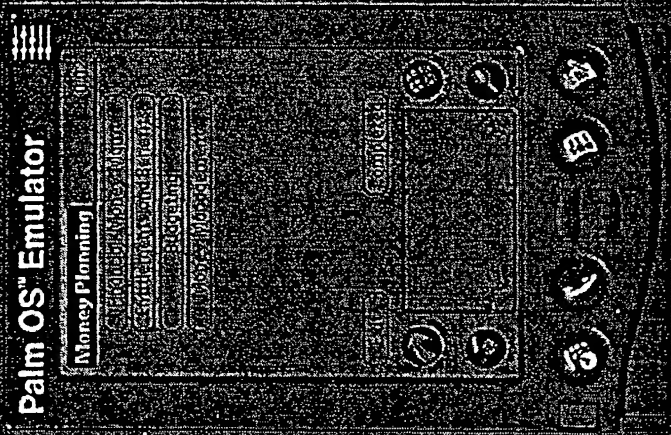
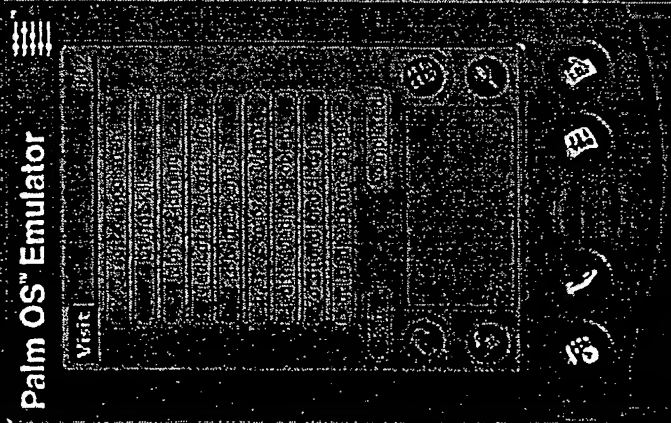


FIG. 45(c)

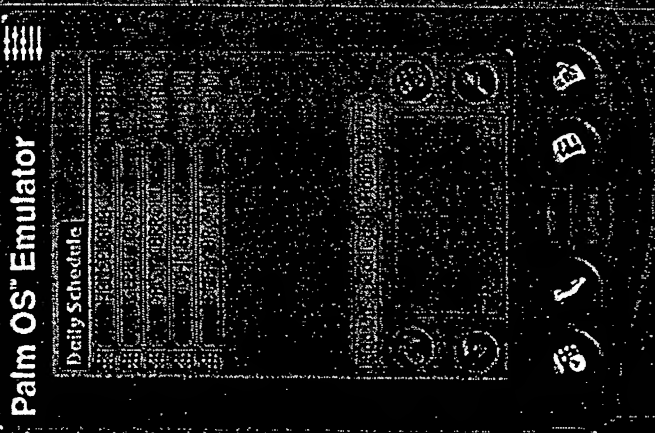
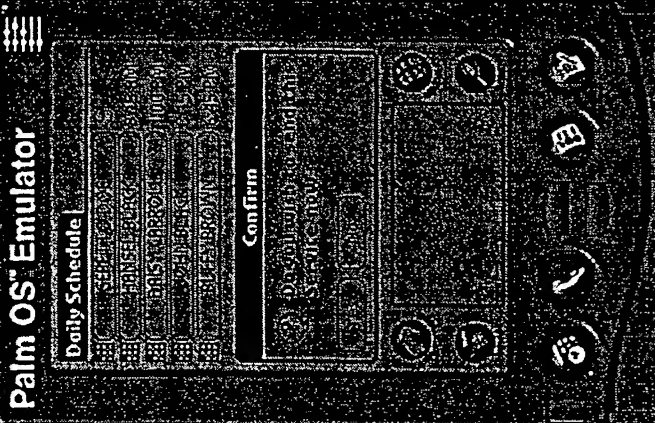
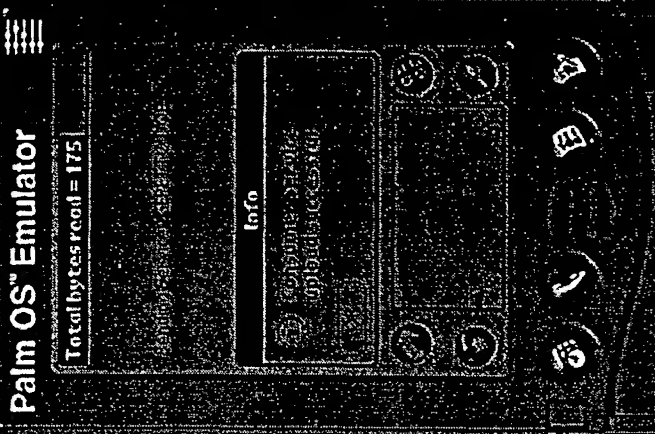


FIG. 45(d)



FIG. 45(c)

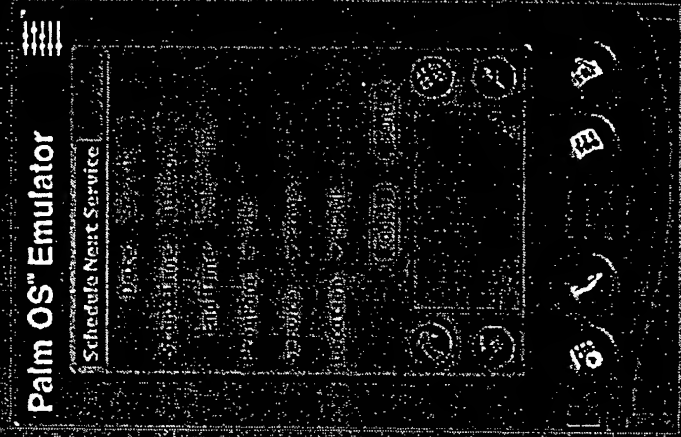
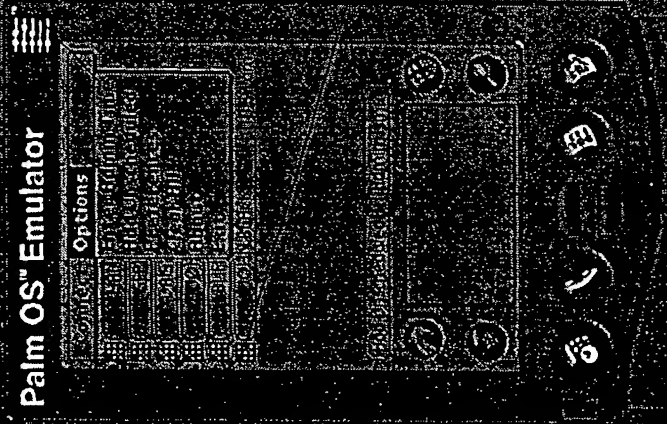
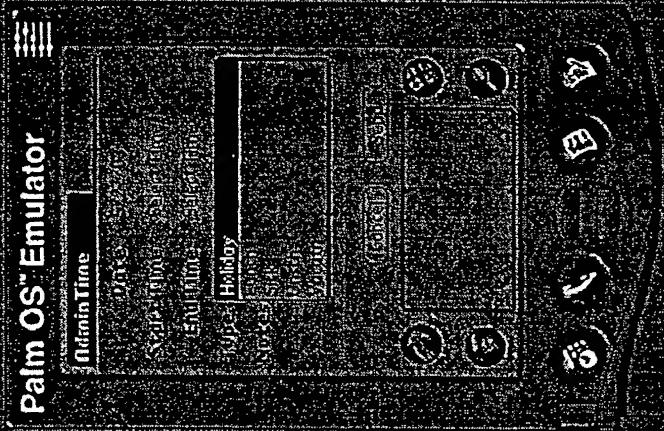


FIG. 46

Question Edit - Microsoft Internet Explorer

File Edit View Favorites Tools Help Send

MobileForm™
CONSOLE

MobileForm Console powered by Credible Wireless

HOME LOGOUT HELP

forms config partners users

Edit Question:

Question: 4602
Order: 7

Suicidal Thoughts

No Label Radio Button ☒ 4604

False ☒ 4612

Select Field ☒ 4620

Updates Questions

Answer Format:
Line Break: ☒
Field Map: ☒

Align: 4610 Right ☒
Bold: 4616 False ☒
Art Spacing: 0 4618

Label X: 1
Multi Line: 1

Spacing: 4608 0 ☒
Control X: 130 4616
Art Spacing: 0 4624

4622

Add new answer by entering the answer text.

Answer: 4628 Order: 4 ☒ Has Notes: NO 4630 Add 4634

Long Text: Client expressed suicidal thoughts. 4632

Existing Answers:

Answer	Has Notes	Delete
Y	NO	X
P	NO	X
N	NO	X

Return to Edit Category Page ReOrder

Build, Edit Data Capture Form

Increased Quality of Care

Medication Compliance Warnings

5/2/02

Client

Staff

Severity	Basis	Trend
1.71	1.71	0.00
1.62	1.62	0.00
1.89	1.89	1.00
1.22	1.22	0.50
0.89	0.89	0.20
0.72	0.72	1.33
0.68	0.68	1.33
0.58	0.58	0.00
0.52	0.52	1.50
0.50	0.50	1.50
0.41	0.41	0.67
0.40	0.40	1.50
0.40	0.40	1.50
0.39	0.39	1.33
0.38	0.38	1.50
0.35	0.35	1.25
0.33	0.33	1.00
0.31	0.31	1.50
0.28	0.28	1.33
0.27	0.27	1.33
0.27	0.27	1.40
0.22	0.22	0.83
0.06	0.06	1.00
0.05	0.05	1.89
0.05	0.05	1.20
0.05	0.05	1.88
0.04	0.04	1.89
0.02	0.02	1.33
0.01	0.01	1.75

1

FIG. 48(a)

Confidential and Proprietary

CREDIBLE
WIRELESS

Replicate Old "Paperwork"



Care Connection, Inc. - Psychiatric Rehabilitation Program
Off-site Daily Service Record and Contact Sheet
Off-site Rehabilitation Provided

1215 ANNAPOLIS ROAD • SUITE 202 • ODENTON, MD 21113 • TEL 410.519.1208 • FAX 410.518.1208

Member Name: John Doe
Insurance ID: 873878277
Staff Name: Frank Radics
Reviewer Comment:

Time In: 2/5/2001 4:10:00 PM
Time Out: 2/5/2001 4:56:00 PM

B2 Community Living Skills	Time In: 2/5/2001 4:31:00 PM	Time Out: 2/5/2001 4:32:00 PM
Linkage to Resources	Comments: transported client to the bank.	
Recreation	Comments:	
Communication Skills	Comments: Able to Express thoughts and feelings to Able to Express wants and needs to:	
Entitlements And Benefits	Comments:	
Development of Support Network	Comments:	
Community Safety	Comments: Awareness of Car Safety.	
Social Skills	Comments: Appreciate Interactions with	
Client Behavior and Report		
Attitude/Mood	Anxious, Cooperative, Guarded	
Affect	Appropriate to Context/Thinking	
Perception	Normal	
Thought Flow	Decreased Thought Flow	
Thought Content	Appropriate	

FIG. 48(b)

Confidential and Proprietary

CREDIBLE
WIRELESS

Signatures "Attached"

Network	Awareness of Car Safety	Comments:
Community Safety	Appropriate Interactions with	Comments:
Social Skills		
Client Behavior and Report		
Attitude/Mood	Anxious, Cooperative, Guarded	
Affect	Appropriate to Context/Thinking	
Perception	Normal	
Thought Flow	Decreased Thought Flow	
Thought Content	Appropriate	

B3 Medication Monitoring	Time In: 2/5/2001 4:11:00 PM	Time Out: 2/5/2001 4:30:00 PM
General	Taking Prescribed Meds: Y	Comments: put clients pills in box for the week
Client Behavior and Report		
Attitude/Mood	Anxious, Cooperative	
Affect	Appropriate to Context/Thinking	
Perception	Normal	
Thought Flow	Decreased Thought Flow	
Thought Content	Appropriate	

F. Radics

Staff Signature

John Doe

Client Signature

Sandra E. Tranen
M.S., N.C.C.

Supervisor's Signature
Approved by Sandra Tranen on 2/8/2001 4:15:58 PM

FIG. 48(c)

Confidential and Proprietary

CREDIBLE
WIRELESS

Easily Viewed Weekly Schedule



CREDIBLE
WIRELESS

eCredibileHomeCare™

LOGIN | CLIENTS | PERSONNEL | PLANNER | ADMIN

(44 prev) Weekly Planner for COL 9/30/2001 (next >>)

SUN 9/30/2001	MON 10/1/2001	TUE 10/2/2001	WED 10/3/2001	THU 10/4/2001	FRI 10/5/2001	SAT 10/6/2001
Group (4) (SCHEDULED) DOE, J (SCHEDULED) 9:00 am	M (COMPLETE) In: 8:45 AM Out: 9:30 AM 9:00 am	M (COMPLETE) In: 9:01 AM Out: 9:46 AM 9:00 am	De (COMPLETE) In: 9:01 AM Out: 9:46 AM 9:00 am	G (RESCHEDULE) 4:00 pm	De (CANCELLED) 9:00 am	
PL (COMPLETE) In: 10:31 AM Out: 11:15 AM 10:30 am	SEL (COMPLETE) In: 9:31 AM Out: 11:34 AM 9:30 am	PL (COMPLETE) In: 9:31 AM Out: 12:11 PM 10:00 am	PL (COMPLETE) In: 9:31 AM Out: 12:11 PM 10:00 am	SEL (SCHEDULED) 12:30 pm	PL (SCHEDULED) 10:00 am	
PL (COMPLETE) In: 11:31 AM Out: 1:00 PM 11:30 am	BIL (COMPLETE) In: 1:32 PM Out: 1:59 PM 1:30 pm	SEL (COMPLETE) In: 12:45 PM Out: 1:29 PM 1:00 pm	SEL (COMPLETE) In: 12:45 PM Out: 1:29 PM 1:00 pm	M (SCHEDULED) 1:00 pm	KL (SCHEDULED) 2:00 pm	
BIL (COMPLETE) In: 3:00 PM Out: 3:56 PM 3:00 pm	GIL (COMPLETE) In: 2:15 PM Out: 3:59 PM 2:15 pm	M (COMPLETE) In: 1:30 PM Out: 2:03 PM 1:30 pm	M (COMPLETE) In: 1:30 PM Out: 2:03 PM 1:30 pm	KL (SCHEDULED) 2:00 pm	SEL (SCHEDULED) 3:00 pm	

Add Sch dul :

Day ☒ SUN Assigned Client Other Client (ID#) Scheduled Time Status ☒ SCHEDULED Position ☒ Next Visit Type ☒ Client Visit

Plan Notes:

FIG. 48(d)

Confidential and Proprietary

CREDIBLE
WIRELESS

Payroll Report: From 8 hours to 1

Payroll Report 5/2/02

Period Start: 01-Apr-2002
Period End: 14-Apr-2002

Double-click on an employee's name to view detailed time punches.

A
VH/Eff: 56/57.13/0.98
Rounded Hrs: 57.26

	4/01	4/02	4/03	4/04	4/05	4/08	4/09	4/10	4/11	4/12	Fi	Total
Apprvd Admin	0.22	0.92	1.80	1.17	0.30	1.58	1.62	1.88	4.63	0.53		14.65
Client/Visit	0.88	4.15	3.83	4.47	3.95	6.12	5.17	5.50	3.85	4.87		42.48
	1.10	5.07	5.73	5.63	4.25	7.70	6.78	7.38	8.28	5.20		57.13

B
VH/Eff: 13/80.72/0.16
Rounded Hrs: 80.75

	4/01	4/02	4/03	4/04	4/05	4/08	4/09	4/10	4/11	4/12	Fi	Total
Apprvd Admin	8.00	8.00	7.25	8.50	6.32	6.42	7.97	6.98	5.98	7.95		73.37
Client/Visit	0.00	0.00	1.03	0.00	0.93	2.00	0.53	1.32	1.20	0.33		7.35
	8.00	8.00	8.28	8.50	7.25	8.42	8.50	8.30	7.18	8.28		80.72

C
VH/Eff: 68/83.48/0.81
Rounded Hrs: 83.50

	4/01	4/02	4/03	4/04	4/05	4/08	4/09	4/10	4/11	4/12	4/13	Total
Apprvd Admin	1.46	2.22	3.47	4.58	3.20	1.63	0.33	3.20	4.67	1.63	1.00	27.38
Client/Visit	6.82	7.58	5.90	4.28	3.78	5.93	2.62	3.97	5.98	5.87	3.47	56.10
	8.27	9.80	9.37	8.87	6.98	7.47	2.95	7.17	10.65	7.50	4.47	83.48

C
VH/Eff: 39/82.08/0.48
Rounded Hrs: 82.00

	4/01	4/02	4/03	4/04	4/05	4/08	4/09	4/10	4/11	4/12	Fi	Total
Apprvd Admin	1.62	2.18	2.12	5.00	1.88	9.48	8.00	1.83	4.68	1.17		37.87
Client/Visit	6.33	6.20	6.07	4.03	5.33	0.00	0.00	7.17	4.75	4.25		44.13
Non-Billable	0.00	0.08	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00		0.08
	7.95	8.47	8.18	9.03	7.22	9.48	8.00	9.00	9.33	5.42		82.08

FIG. 48(e)

Confidential and Proprietary

CREDIBLE
WIRELESS